UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF GEORGIA ATLANTA DIVISION

IN RE: PARAGARD PRODUCTS LIABILITY LITIGATION	: MDL DOCKET NO. 2974
This document relates to:	: 1:20-md-02974-LMM
ANNE DOUGLASS	:
VS. TEVA PHARMACEUTICALS USA, INC.;; TEVA WOMEN'S HEALTH, LLC; TEVA BRANDED PHARMACEUTICAL PRODUCTS R&D, INC.; THE COOPER COMPANIES, INC.; and COOPERSURGICAL, INC.	Civil Action No.:
	I COMPLAINT med below, and for her/their Complaint
against the Defendant(s) named below, in	ncorporate(s) the Second Amended Master
Personal Injury Complaint (Doc. No.	79), in MDL No. 2974 by reference
Plaintiff(s) further plead(s) as follows:	
1. Name of Plaintiff placed with Par	agard:
Anne Douglass	
2. Name of Plaintiff's Spouse (i	if a party to the case):

	N/A
	State of Residence of each Plaintiff (including any Plaintiff in
	representative capacity) at time of filing of Plaintiff's origin complaint:
_	Florida
	State of Residence of each Plaintiff at the time of Paragard placement
	State of Residence of each Plaintiff at the time of Paragard removal: Florida
	District Court and Division in which personal jurisdiction and venue
	would be proper: United States District Court – Middle District of Florida
	- Marie Bisinet Court Marie Bisinet of Frontain
	Defendants. (Check one or more of the following five (5) Defendar
	against whom Plaintiff's Complaint is made. The following five
	Defendants are the only defendants against whom a Short Fo
	Detendants are the only detendants against whom a short to

in a Short Form Complaint.):

X	A. Teva Pharmaceuticals USA, Inc.
\square	B. Teva Women's Health, LLC
X	C. Teva Branded Pharmaceutical Products R&D, Inc.
$\square X$	D. The Cooper Companies, Inc.
X	E. CooperSurgical, Inc.
9.	Basis of Jurisdiction
X	Diversity of Citizenship (28 U.S.C. § 1332(a))
	Other (if Other, identify below):
10.	

Date(s) Plaintiff had	Placing Physician(s) or	Date Plaintiff's Paragard was	Removal Physician(s) or other
Paragard placed (DD/MM/YYYY)	other Health Care Provider (include City and State)	Removed (DD/MM/YYYY)* *If multiple removal(s) or attempted removal procedures, list date of each separately.	Health Care Provider (include City and State)** **If multiple removal(s) or attempted removal procedures, list information separately.
01/07/2016	Kathy Chance, MD 1348 Walton Way. Suite 4100 Augusta, GA 30901	01/27/2023	Dawn Mormak, MD 836 Prudential Dr Suite 1202A, Jacksonville, FL 32207
		02/06/2023	Kathy Chance, MD 1348 Walton Way. Suite 4100 Augusta, GA 30901

11.	Plaintiff alleges breakage (other than thread or string breakage) of her
	Paragard upon removal.
X	Yes
	No
12.	Brief statement of injury(ies) Plaintiff is claiming:
	Significant pain and suffering, complicated medical interventions to remove broken Paragard,
	loss of reproductive health, permanent impairment/disfigurement, and mental anguish.
	Plaintiff reserves her right to allege additional injuries and
	complications specific to her.
13.	Product Identification:
	a. Lot Number of Paragard placed in Plaintiff (if now known):
	Unknown
	b. Did you obtain your Paragard from anyone other than the
	HealthCare Provider who placed your Paragard:
	□ Yes
	⊗ No
14.	Counts in the Master Complaint brought by Plaintiff(s):
X	Count I – Strict Liability / Design Defect
X	Count II – Strict Liability / Failure to Warn
X	Count III – Strict Liability / Manufacturing Defect
X	Count IV – Negligence
X	Count V – Negligence / Design and Manufacturing Defect
X	Count VI – Negligence / Failure to Warn

Cou	nt IX – Negligent Misrepresentation	
Cou	Count X – Breach of Express Warranty	
Cou	Count XI – Breach of Implied Warranty	
Cou	nt XII – Violation of Consumer Protection Laws	
Cou	nt XIII – Gross Negligence	
Cou	Count XIV – Unjust Enrichment	
Cou	Count XV – Punitive Damages	
Cou	Count XVI – Loss of Consortium	
Othe	Other Count(s) (Please state factual and legal basis for other claims	
nclude	ed in the Master Complaint below):	
"Tol	ling/Fraudulent Concealment" allegations:	
a.	Is Plaintiff alleging "Tolling/Fraudulent Concealment"?	
X	Yes	
	No	
b.	If Plaintiff is alleging "tolling/fraudulent concealment" beyond	
	the facts alleged in the Master Complaint, please state the facts	
	and lead basis andicable to the Disintiff in summer of these	
	and legal basis applicable to the Plaintiff in support of those	
	and legal basis applicable to the Plaintiff in support of	
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16.	Cour	nt VII (Fraud & Deceit) and Count VIII (Fraud by Omission)
	alleg	ations:
	a.	Is Plaintiff is bringing a claim under Count VII (Fraud &
		Deceit), Count VIII (Fraud by Omission), and/or any other claim
		for fraud or misrepresentation?
	\Box	Yes
		No
	b.	If Yes, the following information must be provided (in
		accordance with Federal Rule of Civil Procedure 8 and/or 9,
		and/or with pleading requirements applicable to Plaintiff's state
		law claims):
	i.	The alleged statement(s) of material fact that Plaintiff alleges was false: Paragard more effective than other hormone free birth control methods.
		Easily reversible. Easy to remove. Nonsurgical removal in routine office visit. Can be removed anytime. Omitted breakage at or near routine removal requiring complicated medical intervention
	ii.	Who allegedly made the statement:
	iii.	To whom the statement was allegedly made: Plaintiff and her physicians
	iv.	The date(s) on which the statement was allegedly made:
		Various dates while Plaintiff intended to and was implanted with Paragard

- 17. If Plaintiff is bringing any claim for manufacturing defect and alleging facts beyond those contained in the Master Complaint, the following information must be provided:
 - a. What does Plaintiff allege is the manufacturing defect in her Paragard? It is currently unknown if Plaintiffs' specific lot was defectively manufactured. Plaintiff will supplement as discovery proceeds.

18.	Plaintiff's demand for the relief sought if different than what is
	alleged in the Master Complaint:
19.	Jury Demand:
X	Jury Trial is demanded as to all counts
	Jury Trial is NOT demanded as to any count
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	- Attorney(s) for Plaintiff
	Erin Copeland
Address, ph	none number, email address and Bar information:

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